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OF

NEWBIGGIN-BY-THE-SEA



ANNUAL REPORT

OF THE

Medical Officer of Health

For the Year 1952

ASHINGTON:

JOHN WILKINSON (PRINTRRS) LTD.

1953

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ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH FOR 1952

To the Chairman and Members of the Urban District Council of Newbiggin-by-the-Sea.

Mr. Chairman and Councillors,

I have pleasure in presenting to you my Annual Report for the year 1952.

The vital statistics are, in the main, quite satisfactory. The Birth Rate has declined only very slightly and is still higher than the national figure. The Death Rate has also declined and the Maternal Mortality is, again, nil. The Still-Birth Rate is much lower than in 1951, but the Infantile Mortality Rate shows a great increase over the very low figure for the previous year. The total number of infant deaths was only 6, but owing to the fact that the numbers involved are so small a very slight variation in the total deaths produces great variation in the corresponding rate. In fact, there were only 5 deaths of infants actually belonging to the district, and all of these died before reaching the age of two weeks. The single death of an infant over the age of one month occurred as the result of burns sustained when a tent, inhabited by Irish gypsies temporarily resident in the area, took fire.

Notifiable infectious diseases continued to show a very low incidence, and only Measles occurred in any numbers. Only four new cases of Pulmonary Tuberculosis and one of Non-pulmonary Tuberculosis were notified, and there were only two deaths from the disease. The Council has done valuable service to the community by promptly re-housing cases of Tuberculosis when the existing housing conditions were unsatisfactory.

It is pleasant to be able to report that work on the new sewerage scheme at North Seaton Colliery made good progress during the year, and I look forward to the time when the privy conversion scheme will be completed and all the houses will have an internal water supply and wash-up sinks.

During the year 80 new houses were completed, of which 78 were built by the Council and two by private individuals. This is a satisfactory total, and it is to be hoped that the Council will soon feel able to proceed more rapidly with the work of slum clearance. At the east end of Newbiggin this might be combined with a plan for re-development of certain parts of the town.

In conclusion, I wish to thank members of the Council and the staffs of the Health and other departments for the consideration and assistance they have given me.

I have the honour to be,

Your Obedient Servant,

C. B. McGregor, M.B., D.P.H.,

Medical Officer of Health,

Urban District of Newbiggin-by-the-Sea.

URBAN DISTRICT OF NEWBIGGIN-BY-THE-SEA

OFFICERS OF THE PUBLIC HEALTH DEPARTMENT

Medical Officer of Health		• • •		Catherine B. McGregor, M.B., Ch.B., D.P.H.
Assistant Medical Officer	• • •		• • •	Kathleen Dick, M.B., B.S., B.Hy., D.P.H.
Surveyor and Sanitary Inspector	• • •	• • •		H. Selby Robson, M.R.S.I.
Offices of the U.D.C				Council Offices, Front Street, Newbiggin.
Telephone				Newbiggin 350.
Offices of the M.O.H			• • •	146 Station Road, Ashington.
Telephone		• • •		Ashington 2287.
Residence of the M.O.H				36 Churchburn Drive, Morpeth.
Telephone	• • •	• • •	• • •	Morpeth 519.
Residence of the A.M.O.H	• • •			21 Kendor Grove, Morpeth.
Telephone			• • •	Morpeth 647.

SECTION A

Newbiggin-by-the-Sea has an area of 1,841 acres. It is bounded on the north by the Morpeth Rural District, on the north and west by Ashington Urban District, on the south by the River Wansbeck, and on the east by the sea.

Two coal-mines, one at Newbiggin and one at North Seaton Colliery, provide employment for the

bulk of the male working population.

The fishing industry, formerly considerable, is declining and now occupies only a very small number. There are dairy and arable farms in the district, providing employment for a small proportion of the

population.

Newbiggin has a fine sandy beach, which is very popular with the people of Ashington and also attracts many visitors from farther afield. A stretch of moorland adjacent to the shore and lying between St. Bartholomew's Church and the Golf Course is visited by many campers, bringing caravans or tents, every summer. The site is quite suitable for this purpose, being close to both beach and shops, but its use is not always so well controlled as the Council would like. It has in the past been a matter of some concern and requires careful supervision. It is to be hoped that a properly laid out and controlled camping site, with the necessary amenities, may be established in the future.

STATISTICS AND SOCIAL CONDITIONS OF THE AREA Area in Acres	
BIRTHS	
Live Births: Total Male Female Legitimate	
165 74 91	
Crude Birth Rate per 1,000 of the estimated resident population	
Rate per 1,000 of the total (live and still) births	
DEATHS Total Male Female 111 71 40	
Crude Death Rate per 1,000 of the population	
Deaths from Puerperal Causes (heading 30 of the Registrar-General's Short List) :— Rate per 1,000 to	tal
Pregnancy, Childbirth, abortion Deaths (live and still) bir	
Death Rate of Infants under 1 year: All infants per 1,000 legitimate live births	
Deaths of infants under 4 weeks of age:— Total Male Female Legitimate 5 4 1	

The Registrar-General supplies the following: —

		CAUSES	OF	DEA	TH				D 1 1	1
									Male	Female
].									2	
2.	` '	• • • • • • •								
3.	Syphilitic Disease	• • • • • • • • • • • • • • • • • • • •							2	
4.	Diphtheria	• • • • • • • • • • • • • • • • • • • •								
5.	Whooping Cough	• • • • • • •								
6.	Meningococcal Infections	• • • • • • • • • • • • • • • • • • • •								
7.		• • • • • • • • • • • • • • • • • • • •								
8.			• • •							
9.	Other Infective and Parasiti									
10.	Malignant Neoplasm, stoma		• • •						4	
11.	Malignant Neoplasm, lung,								4	
12.	Malignant Neoplasm, breas				• • •					
13.	Malignant Neoplasm, uteru		• • •							2
14.	Other Malignant and Lymph		sms						6	3
15.	D: 1	• • • • • • • • • • • • • • • • • • • •								
16.	Diabetes (N	· · · · · · · · · · · · · · · · · · ·	• • •						4 4	
17.	Vascular Lesions of Nervou		• • •						14	/
18.		···							8	3
19.	Hypertension with Heart D		• • •	• • •					3	1.2
20.	Other Circulatory Disease	• • • • • • • • • • • • • • • • • • • •		• • •					13	13
21. 22.	Other Circulatory Disease	• • • • • •	• • •						3	ı
23.	Influenza	• • • • • • • • • • • • • • • • • • • •		• • •				• • •	1	
25. 24.	Pneumonia Bronchitis	• • • • • • • • • • • • • • • • • • • •				• • •			1	
2 4 . 25.	Other Diseases of Respirate	over Syratom	• • •						4	*
	Ulcer of Stomach or Duode		• • •	• • •	• • •				1	
26. 27.	Gastritis, Enteritis and Diag			• • •					1	
28.	X T		• • •							
29.	TT 1 CD	• • •								
30.	Pregnancy, Childbirth, Ab	ortion								
31.	. 1 7 / 10 .						* * *			
32.	Other Defined and Ill-defin	ad Disassas			• • •				2 3	
33.	7 / 7 / 1 / 1 / 4 / 1								3	3
34.	A 11 .1 A + 1		• • •			• • •			1	
35.	\circ · · 1	• • •	• • •						ı	2
36.	Homicide and Operations of	of War				* * *	3 0 0	* * *	-	Later and the same of the same
50.	Tomiciae and Operations of	or vv ar							- The same	evenine Phy
									71	40
Deatl	hs of Infants under 1 year:-								-	
	Legitimate								Male	Female
	<u> </u>						• • •	b	4	2
										-

CHIEF CAUSES OF DEATH IN NEWBIGGIN

				Total No	Ο.	% of Total Deaths
Diseases of Heart and Circulation .	 	 	 	 45		40.54
Malignant Neoplasms	 	 	 	 22		19.82
Vascular Lesions of Nervous System	 	 	 	 21		18.92

INFANTILE MORTALITY, 1952

	Under	1-2	2-3	3-4	Total Under	1-2	3-5	6-8	9-12	Total Under
	1 wk.	wks.	wks.	wks.	1 mth.			mths.	mths.	1 year
Prematurity	 3				3					3
Congenital abnormality	 	2			2					2
Accident (Burns)	 							1		1
	3	2	0 - 47-40		5			1		6

SECTION B

GENERAL PROVISIONS OF HEALTH SERVICES FOR THE AREA LABORATORY FACILITIES

These are provided by the Public Health Laboratory Service in the laboratory situated at Newcastle General Hospital. The extent to which the facilities have been utilised is shown below:—

Specimen sent by	Specimen	Pos.	Neg.
Regional Hospital Board Chest Physician General Practitioners	Sputa for B. Tuberculosis	7	87 7
General Practitioners	Swabs for C. Diphtheriæ		3
General Practitioners	Swabs for Hæm. Streptococci	2	3
General Practitioners	Swabs for Vincent's Angina		2
General Practitioners	Swabs for Staph. Aureus		1
General Practitioners Medical Officer of Health	Fæces for pathogenic organisms do.	<u>_</u>	5 10
Medical Officer of Health	Enteric Organisms for phage- typing	1	
Medical Officer of Health	Urine for pathogenic organisms		2
Regional Hospital Board Physician	Blood for enteric organisms	1	

AMBULANCE FACILITIES

The ambulance service in Newbiggin is provided by the Northumberland County Council, with ambulances stationed at Ashington. At North Seaton Colliery the Miners' Welfare Committee continues to run its own ambulance service, but any North Seaton resident not entitled to this service can obtain the use of a County Council ambulance when necessary.

NURSING IN THE HOME

This service is administered and provided by the Northumberland County Council and nurses are stationed as follows:—

 Newbiggin
 ...
 ...
 ...
 ...
 3

 North Seaton
 ...
 ...
 ...
 1

MATERNITY AND CHILD WELFARE SERVICES

These are provided by the County Council and clinics are held at the Child Welfare Centre, Jubilee Terrace, Newbiggin, as follows:—

Child Welfare Clinic ... Every Thursday, morning and afternoon.

Diphtheria Immunisation ... Wednesday morning, at 4-weekly intervals.

Ante-natal Clinic ... Every Tuesday afternoon.

Clinics are also held at 18 High Double Row, North Seaton Colliery, as follows:-

Child Welfare Clinics ... Every Monday afternoon.

Ante-natal Clinic ... Friday afternoon, fortnightly.

SECTION C

WATER

The water undertaking in the Urban District is the property of Tynemouth Corporation, which is responsible for the supply of water in detail, to the Newbiggin area and to 26 Council houses at North Seaton Colliery. The supply was adequate throughout the year and no complaints were received.

At North Seaton Colliery all houses, except those owned by the Council, are supplied with water pumped from North Seaton Pit. This water is pure, but very hard.

The Colliery village is still served mainly by standpipe, but by the end of 1953 all the houses will have been provided with wash-up sinks and an internal cold-water supply.

North Scaton Village consists of 23 houses, of which 5 receive the main water supply, and 18 receive water from North Scaton Pit and are served by standpipes.

SEWERAGE AND SEWAGE DISPOSAL. North Seaton Colliery

Work on the sewerage scheme for North Seaton Colliery made good progress and, during the year, all the new sewers were laid and the construction of the sewage holding-tank was completed. Completion of this preliminary work will enable the privy conversion scheme to proceed in 1953.

PUBLIC CONVENIENCES.

There are, at present, three public conveniences in Newbiggin, and these are situated at Bridge Street, Prospect Place and Milburn Park. The construction of a new public convenience on the premenade began during the year, but completion was delayed by non-delivery of certain machinery which is in short supply. It is anticipated that the building will be completed some time in 1953.

PUBLIC CLEANSING

All scavenging is carried out by direct labour by means of three motor-driven cleansing vehicles. All ashbins are emptied twice weekly.

REFUSE TIPS

Refuse from Newbiggin is deposited at the Blue Holes tip. Refuse from North Seaton is deposited on the new tip at the foot of Sandy Lane.

SHOPS AND OFFICES

Shops and food premises were visited as often as possible and on receipt of any complaint. Some premises left much to be desired and in several cases improvements were effected.

SWIMMING BATHS AND POOLS

There are no swimming baths in the area. Pit-head baths are in use at both Collieries, with accommodation as follows:—

 Newbiggin
 ...
 ...
 1,050

 North Seaton
 ...
 ...
 750

These are for the use of mineworkers.

ERADICATION OF BED BUG

Six Council and ten private houses were found to be infested during the year and were disinfested by means of "Pyragra" insecticide and with a pressure spray. All disinfestations are carried out by Council workmen.

SCHOOLS

Number of schools in	the distr	rict:—	
Newbiggin			 3 Council Schools (modern, junior and infant).
			1 Church of England School (junior and infant).
North Seaton			 2 Council Schools (mixed and infant).

RATS

Sewers were baited regularly, business premises and houses on receipt of complaint.

	No. of Inspections during year	No. of Defects or Contraventions of Bye-Laws	No. of Informal Notices served	Defects remedied by informal action	No. of Statutory Notices served	Defects remedied after Statutory Notice	Legal Proceedings
HOUSING Structural Defects (Summary of Sheet 11)	149	7 11 15	7 9	7 9 —			
WATER SUPPLY Insufficient) Unsatisfactory	21					_	
DRAINAGE Insufficient	15	15		13			_
SANITARY CONVENIENCES Insufficient Defective	43	57				-8	
Food Premises Shops Acts Dairies Slaughter Houses Tents, Vans, etc. Offensive Trades Factories and Workplaces Keeping of Animals Insanitary Ashpits and Receptacles Offensive Accumulations Smoke Nuisances	$ \begin{array}{c} 24 \\ 7 \\ 12 \\ \hline -25 \\ \hline 42 \\ 16 \\ 37 \\ 13 \\ 4 \end{array} $	12 2 	12 2 4 9 2 35 6 	12 2 4 9 2 35 6 			
Total	408	177	128	128	12	12	

SUMMARY OF WORK EFFECTED

	By Informal Action	By Statutory Notice	Total
SANITARY CONVENIENCES Privies abolished	29 — — 80 35	 2	37 — 80 37
DRAINAGE New Drains constructed	80 13 	2 2 2 —	80 15 15 11 11 11 4
WATER SUPPLY Sources closed or discontinued . Nil NEW SERVICES PROVIDED By Local Authority 78 By Private Owner 2 Number of Dwelling-houses supplied	Number o Number o ed by (a) In	f houses .	eted Nil 78 2 2,474 327

FACTORIES ACT

There are in the district 22 factories and workshops. The following table gives details of the inspections made and the defects found during 1952.

There are no outworkers in the district.

1.—INSPECTIONS for the purposes of provisions as to health (including inspections made by Sanitary Inspectors).

			Number of				
Premises		Number on Register	Inspections	Written Notices	Occupiers Prosecuted		
(i)	Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	10	20	2			
(ii)	Factories not included in (i) to which Section 7 is enforced by the Local Authority	11	22	4			
(iii)	Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	1	1	_			
	Total	22	43	6	-		

Particulars	Number of	cases in wh]	were found rred By H.M. Inspector	Number of Cases in which prosecutions were instituted
Want of Cleanliness (S.1)	7 — — 1.	7			
(a) Insufficient		<u> </u>		=	
Other offences (not including offences relating to outwork)	_		_	_	_
Total	8	8	_		

SECTION D

HOUSING

Number of New Houses erected during the year:—

Houses completed during the year	With State Assistance	Unaided	Total
(a) By Local Authority, Permanent (b) By other Bodies or Persons,	78		78
Permanent	- 4	2	2

1.	 (1) Total number of dwelling houses inspected for housing defects (under Public Health or Housing Acts) (2) Number of dwelling houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation (3) Number of dwelling houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation 	105 9 42
2.	Number of defective dwelling houses rendered fit in consequence of informal action by Local Authority or its officers	42
3.	ACTION UNDER STATUTORY POWERS:— (A) Proceedings under Sections 9, 10 and 16 of the Housing Act, 1936.	
	 (A) Proceedings under Sections 9, 10 and 16 of the Housing Act, 1936: (1) Number of dwelling houses in respect of which notices were served requiring repairs (2) Number of dwelling houses which were rendered fit after service of formal notices:— (a) By Owners (b) By Local Authority in default of owners (c) Number of dwelling houses which were rendered fit after service of formal notices:— (d) Number of dwelling houses which were rendered fit after service of formal notices:— (a) Number of dwelling houses which were rendered fit after service of formal notices:— (d) Number of dwelling houses which were rendered fit after service of formal notices:— 	Nil Nil
	(B) Proceedings under Public Health Acts:	
	(1) Number of dwelling houses in respect of which notices were served requiring defects to be remedied	14
	notices:— (a) By Owners	14

(C) Proceedings under Section 11 and 12 of the Housing Act, 1936:— (1) Number of dwelling houses in respect of which Demolition Orders were made Nil (2) Number of dwelling houses demolished in pursuance of Demolition Orders Nil (3) Number of dwelling houses closed but not demolished (Housing Act, 1949, Sec. 3) Nil (D) Proceedings under Section 12 of the Housing Act, 1936:— (1) Number of separate tenements or underground rooms in respect of which Closing Orders were made
HOUSING ACT, 1949 (Sec. 20) (a) Number of separate dwelling houses in respect of which applications for grant have been received
SECTION E
INSPECTION AND SUPERVISION OF FOOD
MILK SUPPLY Number of Registered Dairies
MEAT AND OTHER FOODS All slaughtering is done at Ashington under the Ministry of Food. The following is a statement of foodstuffs which were voluntarily surrendered to me during the year and found to be unfit for human consumption:— Unsound Food Canned Goods Cann
SECTION F
PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES Hospital accommodation for cases of infectious disease is now provided by the Regional Hospital Board at Walkergate Hospital, Newcastle. TABLE SHOWING ANALYSIS OF NOTIFIED CASES OF INFECTIOUS DISEASES UNDER AGE GROUPS
Age Unknown Under 1 year 1-2 years 5-9 years 5-9 years 5-9 years 5-4 years 20-34 years 35-44 years 45-64 years 45-64 years Admitted to Hospital Deaths
Pnuemonia —

ZYMOTIC DEATH RATE

The term includes deaths from the following seven diseases only: Smallpox, Scarlet Fever, Enteric Fever, Diphtheria, Whooping Cough, Measles, Diarrhœa and Enteritis under two years.

The Zymotic Death Rate was Nil.

ENTERIC FEVERS

No case of Typhoid Fever occurred during the year.

One case of Paratyphoid Fever was notified. The patient was an infant aged 3 months, and it might have seemed that in such a case there was a good chance of discovering the source of infection, but, in spite of careful investigation, the source of infection was not detected and examination of contacts was negative. The baby's mother had had a slight illness just about the time when he must have acquired his infection, and it may be that she was an ambulant case of the disease and passed on the germ to the child, but no bacteriological proof of this was forthcoming and there was no evidence to show where she could have been infected. The type of organism ("Beccles") isolated from the infant had not been found in any previous case which had occurred in the district.

The infant was removed to hospital before the diagnosis was made, but was discharged shortly afterwards and was nursed at home. He made a good recovery and no other cases occurred.

MEASLES

This disease was not recorded as occurring in the district between July, 1951, and May, 1952.

It reappeared in the latter month and became prevalent about mid-November, and epidemic in December. During the latter half of November 23 cases were notified, and in December 75. The total for the year was 118.

FOOD POISONING

One case of food-poisoning occurred. The patient was a girl aged 1½ years and it is probable that she was infected while out of the district on holiday. She continued to carry the germ for about 7 weeks before being proved free from infection.

MENINGOCOCCAL MENINGITIS

The case of Meningococcal Meningitis occurred in a girl aged 1½ years who was living with her parents and two older sisters in very congested and overcrowded conditions such as are known to be ideal for facilitating spread of infection. She was very ill, but recovered.

DYSENTERY

One case of Dysentery occurred. This was connected with an outbreak of the disease in an adjoining area and was not contracted in Newbiggin.

DIPHTHERIA

No case of Diphtheria occurred during the year. It is now over 5 years since this disease caused any deaths.

DIPHTHERIA IMMUNISATION

No visits were paid to the schools in the district during 1952. The full course of primary immunisation was given at the Child Welfare Centres and by private doctors to 132 pre-school children and 2 school children. In addition, 41 children received re-inforcing injections.

It was estimated that the immunisation state of the child population at 31:12:52 was as follows:—

 Pre-school children immunised
 ...
 ...
 ...
 ...
 ...
 62.99%

 Total children immunised
 ...
 ...
 2,221
 ...
 ...
 89.13%

The decrease in the percentage of pre-school children immunised is somewhat disappointing, but it is mainly accounted for by the fact that a very large number of children born in 1947 had been immunised and these passed into the school-age group, while there was a slight increase in the number of children born in 1952, of whom only 5 had been fully immunised by the end of the year. This latter figure falls far short of the target set by the Ministry of Health, viz. that 75% of babies should be immunised before their first birthday.

The following table shows the continuing decline of Diphtheria in England and Wales:

Year		Deaths		Cases
1944	 	934	 	23,199
1945	 	722	 	18,596
1946	 	472	 	11,986
1947	 	244	 	5,609
1948	 	156	 	3,575
1949	 	84	 	1,890
1950	 	49	 	962
1951	 	34	 	699
1952	 	31	 	375

The average annual number of deaths for the 10-year period 1931-1940 was 2,800.

These figures indicate the continuing success of the campaign against diphtheria, but there is a danger that this very success will lead parents to assume that this disease is no longer a menace. Diphtheria is now an uncommon disease, but if preventive efforts were relaxed there might be a return of serious outbreaks. During 1952 there were, in some parts of the country, sharp reminders that "diphtheria still kills".

The following table, which includes figures obtained from the Registrar-General's return S.D. 55, shows the comparative figures of notifications of certain diseases in England and Wales, the 160 Smaller Towns and Newbiggin.

Diseases		Cases notified in the district	Rate p	ulation England & Wales		
Scarlet Fever			12 118 3 13 1	1.22 12.05 0.30 1.32 0.10 0.10	1.58 8.49 2.57 0.62 0.03 0.11	1.53 8.86 2.61 0.72 0.02 0.13

TUBERCULOSIS

				New	Cases				De	aths		
			Res	sp.	Non-l	Resp.		Re	sp.	Non-	Resp.	
			Μ.	F.	Μ.	F.	Total	Μ.	F.	M.	F.	Tota
5 - 14 years	 	+ • a				1	1					
15 - 24 years	 		 1	1			2					
25 - 44 years	 		 1	1			2	2				2
45 - 64 years	 		 			-	-		-			
65 years and over	 			difference of the second						-		
		Total	 2	2		1	5	2				2

0.10 per 1,000 population Only four new cases of Pulmonary Tuberculosis were notified during 1952, a reduction of 2 on the number for 1951. Only one case of Non-Pulmonary Tuberculosis was notified, compared with 2 in 1951.

0.41 per 1,000 population

Case rate of Pulmonary Tuberculosis ...

Case rate of Non-Pulmonary Tuberculosis ...

There were again only two deaths from Pulmonary Tuberculosis, and none from other forms of the disease. The fatal cases occurred in men of 31 and 34 years respectively.

MALIGNANT NEOPLASMS

The following table shows the deaths, in age-groups, resulting from Malignant Neoplasms of different sites:—

MORTALITY FROM MALIGNANT NEOPLASMS

			MALES								FEMALES					
		25-34	35-44	45-54	55-64	65-74	75 +	Total	45-54	55-64	65-74	75+	Total			
Tongue							1	1								
Lung		 			4			4				1	1			
Breast		 									1	-	1			
Stomach		 1			1	1	1	4		1		-	1			
Gall-bladder		 					-				1		1			
Colon		 				1	1	2			1	-	1			
Rectum		 		-		-	1	1			1	-	1			
Uterus		 	-				-				1		1			
Cervix		 						-	1				1,			
Bladder		 	-		1			1	-		-					
Lymphatic S	System	 		1				1		-	_		encommercial re			
	Total	 1		1	6	2	4	14	1	1	5	1	8			

In 1952 the number of males dying from this cause was 14 and the number of females 8. The corresponding figures for 1951 were 8 and 7 respectively.

Death Rate from Malignant Neoplasms: 2.25 per 1,000 population.

ANNUAL REPORTS OF MEDICAL OFFICERS OF HEALTH — 1952

VITAL STATISTICS

Birth-rates, Death-rates, Analysis of Mortality, Maternal Mortality and Case-rates for Certain Infectious
Diseases in the Year 1952. Provisional figures based on Quarterly Returns

	England and Wales	Boroughs and Great Towns (including	Towns (Resident Population 25,000-50,000 1951 Census)	London Administrative County
Births -	Rat	es per 1,000 H	ome Populatio	on
Live Births Still Births	15.3 0.35 22.6 (a)	16.9 0.43 24.6 (a)	15.5 0.36 23.0 (a)	17.6 0.34 19.2 (a)
All Causes	11.3 0.00 0.00 0.00 0.24 0.04 0.00 0.01 0.47	$ \begin{array}{c} 12.1 \\ 0.00 \\ 0.00 \\ 0.00 \\ 0.28 \\ 0.04 \\ \hline 0.01 \\ 0.52 \end{array} $	$\begin{array}{c} 11.2 \\ 0.00 \\ 0.00 \\ 0.00 \\ 0.22 \\ 0.04 \\ \hline \\ 0.00 \\ 0.43 \end{array}$	12.6
Notifications (Corrected) Typhoid Fever	0.00 0.02 0.03 1.53 2.61 0.01 0.14 0.00 8.86 0.72 0.06 0.03 0.13 17.87 (a)	0.00 0.02 0.03 1.75 2.74 0.01 0.15 0.00 10.11 0.80 0.06 0.03 0.16 23.94 (a)	0.00 0.03 0.03 1.58 2.57 0.03 0.12 0.00 8.49 0.62 0.06 0.02 0.11 10.22 (a)	0.00 0.01 0.02 1.56 1.66 0.01 0.14 — 9.23 0.57 0.06 0.03 0.18 30.77 (a)
Deaths All causes under 1 year of age	27.6 (b) 1.1	Rates per 1,000 31.2 1.3	25.8 0.5	23.8 0.7
Maternal Mortality	in England	d and Wales		
Intermediate List No. and Cause All Sepsis of pregnancy, childbirth and the puerperium	Numbe of Deaths	Total Still	per 1,000 (Live and Births	Rates per million women Aged 15-44
Abortion with toxaemia	13		0.02	1
A117 Haemorrhage of pregnancy and childbirth A118 Abortion without mention of sepsis or toxaer A119 Abortion with sepsis	59 mia 31 47		0.09 0.04 0.07	3 5
A120 Other complications of pregnancy, childbirt and the puerperium	5h		0.20	_

⁽a) Per 1,000 Total (Live and Still) Births.

⁽b) Per 1,000 related live births.







